## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
American Crossroads	C C00487363
	M = M / D = D / Y = Y = Y
Check if 24-hour report 48-hour report New report Amends report filed	
Full Name of Payee Main Street Media	Date of Public Distribution/Dissemination
	10 13 2014
Mailing Address P.O. Box 25093	Amount
City State Zip Code	2597212.50
Alexandria VA 22313	Transaction ID : SE.1  Date of Disbursement or Obligation
Purpose of Expenditure TV / Media Placement  Category/ Type	10 10 2014
Name of Federal Candidate Support Office	e Sought: House District:
Jeanne Shaheen Oppose	President State: NH State:
Calendar Year-To-Date Per Election for Office Sought  Disbut 2618669.06 2014	ursement For: Primary
Full Name of Payee	Date of Public Distribution/Dissemination
McCarthy Hennings Whalen, Inc.	10 13 2014
Mailing Address 1850 M Street NW	Amount
Suite 235	
City State Zip Code Washington DC 20036	6393.65 Transaction ID : SE.2
Purpose of Expanditure	Date of Disbursement or Obligation
TV / Media Production Type	10 14 2014
Lancas Obahana	e Sought: House District:
Jeanne Shaheen Oppose	President Senate State: NH
Calendar Year-To-Date Per Election for Office Sought  Disbute 2014	ursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	2603606.15
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
24.0	10 15 2014
Signature	

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	LIVI LXI LIVI	ON ONES	PAGE 2 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
American Crossroads			C C00487363
Check if 24-hour report X 48-hour report	New re	port Amends repo	ort filed on
Full Name of Payee McCarthy Hennings Whalen, Inc			Date of Public Distribution/Dissemination
Mailing Address 1850 M Street NW			10 13 2014 Amount
Suite 235			
City Washington	State DC	Zip Code 20036	633.00  Transaction ID : SE.3  Date of Disbursement or Obligation
Purpose of Expenditure TV / Media Production		Category/ Type	Date of Disbursement of Obligation  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought: House District:
Jeanne Shaheen		X Oppose	President Senate State: NH
Calendar Year-To-Date Per Election for Office Sought		2618669.06	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶
Full Name of Payee thinkfilm, Inc			Date of Public Distribution/Dissemination
Mailing Address 1335 Windsor Ridge Ln			10 13 2014 Amount
City Annapolis	State MD	Zip Code 21409	1007.25 Transaction ID : SE.4
Purpose of Expenditure TV / Media Production		Category/ Type	Date of Disbursement or Obligation  Mo6 13 2014
Name of Federal Candidate		Cupport	Office Sought: House District:
Jeanne Shaheen		Support Oppose	President Senate State: NH
Calendar Year-To-Date Per Election for Office Sought		2618669.06	Disbursement For:  Primary  General  2014  Gther (specify) ▶
(a) SUBTOTAL of Itemized Independent Expendent	litures		1640.25
(b) SUBTOTAL of Unitemized Independent Expe	enditures		. •
(c) TOTAL Independent Expenditures			<b>)</b>
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Caleb Crosby	[Electro	onically Filed] Date	9 10 15 Y 2014
Signature			

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 3 OF 3 FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼		
American Crossroads	C C00487363		
Check if 24-hour report X 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y		
Full Name of Payee	Date of Public Distribution/Dissemination		
thinkfilm, Inc	10 / 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 1335 Windsor Ridge Ln	Amount		
City State Zip Code	13422.66		
Annapolis MD 21409	Transaction ID : SE.5 Date of Disbursement or Obligation		
Purpose of Expenditure TV / Media Production  Category/ Type	04 16 7 2014		
Name of Federal Candidate Support Office	Sought: House District:		
leanne Shaheen	President Senate State: NH		
Calendar Year-To-Date Per Election for Office Sought  Disbut 2014	rsement For:		
Full Name of Payee	Date of Public Distribution/Dissemination		
Malling Address	M M / D D / Y Y Y Y		
Mailing Address	Amount		
City State Zip Code			
	Date of Disbursement or Obligation		
Purpose of Expenditure  Category/ Type	M = M / D = D / Y = Y = Y		
Name of Federal Candidate Support Office	Sought: House District:		
Oppose	President Senate State:		
Calendar Year-To-Date Per Election for Office Sought	resement For: Primary General		
	Other (specify) -		
(a) SUBTOTAL of Itemized Independent Expenditures	13422.66		
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures	2618669.06		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Caleb Crosby  [Electronically Filed] Date			
Signature			